HYRS Application 2025:

*This document is to provide an overview of the questions asked in the HYRS student application so you can save your responses before applying.*

*Deadline to submit: Sunday March 23 at midnight (*[*HYRS Student Application*](https://uleth.qualtrics.com/jfe/form/SV_9Bl7v3khyTraWW2)*)*

# Personal Information *(section 1)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name:** |  | | | | |
| **Last Name:** |  | | | | |
| **Are you a grade 11 student:** | | | | | Y / N |
| **Do you live and attend a high school in Alberta?** | | | | | Y / N |
| *Note: the uLethbridge HYRS program is open to those living in or south of Claresholm. If you live outside this area, please refer to the HYRS program at the University of Calgary or other program sites.* | | | | | |
| **Date of Birth** | | | | (mm / dd / yyyy) | |
| **Gender** | | | | Female / Male / Non-Binary | |
| **Are you legally allowed to work in Canada?** | | | | Y / N | |
| *Be aware that successful candidates will be asked to provide a SIN # or Permanent Residency # along with direct deposit information of a bank account in their name (not a family member). If you do not have your own account, please begin that process now.* | | | | | |
| **Home Address:**  Street  City/Town  Province  Postal Code | |  | | | |
| **Parent/Guardian Phone Number** | |  | | | |
| **Your Phone Number** | |  | | | |
| **Email Address** | |  | | | |
| *Please use an email that is checked regularly as we will reach out if anything is missing on your application.* | | | | | |
| **What is the best way to contact you?** | | | Adult # / Your # / Email | | |

# School Information *(section 2)*

|  |  |
| --- | --- |
| **Your School’s Name:** |  |
| **School’s City/Town:** |  |
| **School Principal’s Name:** |  |
| **School’s Street Address:** |  |

# Reference Information *(section 3)*

**IMPORTANT:** You are responsible for ensuring that your references submit their forms on time. Everyone is busy, remember to give them lots of warning and follow up to ensure it has gone through! **All 3 references must be submitted by March 30, 2025.**

You are required to provide both Teacher & Community references.

*>>* [*uleth.ca/artsci/hyrs-reference-submissions*](uleth.ca/artsci/hyrs-reference-submissions)

**Teachers:** 2x Science Teachers **or** 1x Science and 1x Math Teacher

**Community:** Must be an adult who is not a relative and who is outside of your high school.

|  |  |
| --- | --- |
| **Teacher References:**  1)  2) | **Community Reference:**  1) |

# Academic Background *(section 4)*

**Please upload a copy of your most recent grade report**

***Notes:***

*- Combine into 1 document before submitting.*

*- Must show grades for Biology 20, Math 20-1 or 20-2 and 1 other Grade 11 science*

*- Documents should be stamped by your school office.*

*- Grade 12 courses will not be considered.*

If you have any comments regarding your grade report, please post them here rather than sending an email.

|  |
| --- |
|  |

**Check all the courses you have COMPLETED or ARE TAKING:**   
*\*indicate required courses  
Must have at least an 85% average in each of biology 20, math 20-1 or 20-2, and 1 other Gr 11 science.*

|  |  |
| --- | --- |
| Biology 20\* |  |
| Math 20-1\* |  |
| Math 20-2\* |  |
| Chemistry 20 |  |
| Physics 20 |  |

**Are you currently enrolled in, or have you completed any of the following Grade 12 courses?** *Note these grades will not be considered for eligibility to the program.*

|  |  |
| --- | --- |
| Biology 30 |  |
| Chemistry 30 |  |
| Math 30 (pure) |  |
| Physics 30 |  |

**What are your current interests, hobbies, activities and special abilities?**

|  |
| --- |
|  |

**What high school and/or community groups are you currently involved with?**

|  |
| --- |
|  |

# Tell us about your interest in Science & Research *(section 5)*

**At present, what is your career goal, and why does it interest you?**

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Are you willing to work in a research lab that uses animals:** | Y / N |
| *Without biomedical research, many of our life-saving advances in medicine and health would not exist. Key to these advances is the use of animals in biomedical research according to the strictest ethical guidelines. For more information please go to the web site of the Canadian Council on Animal Care, which is the national body that sets guidelines for the experimental use of animals in academic institutions: http://www.ccac.ca/. As participants in university research projects, HYRS students may be asked to participate in research involving animals.* | |

|  |  |
| --- | --- |
| What subject fields are you most interested in? **PICK 3** | * Agriculture * Biochemistry * Biological Science * Chemistry * Computer Science * Digital Health * Mathematics * Neuroscience * Physics * Psychology |

**Upload your Essay**

**There is a hard limit of 400 words***anything beyond this limit will not be given to selection committee*

|  |  |
| --- | --- |
| Formatting: *- 12 pt font  - typed  - double-spaced  - 350 to 400 words* | **Prompt:**Please address the following points. Remember, we want to hear your thoughts and ideas. 1. **Tell us about a particular area of scientific research impacting on health that interests you and why.** 2. **Tell us why you want to be part of the HYRS Program*.*** |

# Program Commitments *(section 6)*

|  |  |
| --- | --- |
| **Are you able to commit to giving a presentation to a science class about your HYRS experience?** | Y / N |
| *One of the expectations of HYRS participants is that they will relate their research experiences to their peers. HYRS participants are required, upon their return to their high schools for their Grade 12 school year, to give at least one presentation about their summer research experience to a younger science class.* | |
| **Do you have up-to-date immunizations?** | Y / N |
| *All participants in the HYRS Program should have up-to-date immunizations and be prepared to produce their immunization records upon request. Additionally, participants may be asked to obtain further immunization shots, for example, Tetanus, depending on the type of research they may be working on. If you are not immunized and are not willing to obtain up-to-date immunization or comply with university regulations for additional immunizations, you can only work with those researchers who do not operate wet laboratories, if available.* | |
| **I understand and am prepared to make my own living arrangements** | Y / N |
| *Students must make their own living arrangements while attending the HYRS program. Students who are unable to find living arrangements may wish to consider options such as the Canadian Homestay Network (https://canadahomestaynetwork.ca/). Guardians should contact any housing agencies prior to the HYRS application deadline.* | |
| **I am able to commit to the full 6-consecutive weeks of the program?** | Y / N |
| *You must be prepared to commit to the full six consecutive weeks of the HYRS program. You will not be able to take time off for vacations, competitions or to collect awards. Failure to do so will disqualify your application and cancel your placement in the program.* | |

**Student Signature:** (form will allow you to sign digitally)

|  |  |
| --- | --- |
| **Parent/Legal Guardian Signature:** | *Upload a photo of your parent/legal guardian's signature.* |
| ***Date Signed:*** | *(mm / dd / yyyy)* |

|  |  |
| --- | --- |
| **Do you require a second parent/legal guardian to give consent?** | Y / N |
| *\*if yes, you will be prompted to upload a second photo and date entry.* | |

# Confirm Submission *(section 7)*

By submitting this application, you authorize the verification of the information provided on this form and agree that we can follow-up with you via email, phone and/or in writing. The personal information on this form is collected under the authority of the Post-secondary Learning Act (Alberta) and the Freedom of Information and Protection of Privacy Act (Alberta).

The use of this information will be restricted to the application to the HYRS program at the University of Lethbridge and for the purpose of administering your admission to this program.

For questions about the collection, use and disclosure of this information, please contact the University's FOIP Coordinator at 4401 University Drive West, Lethbridge, AB T1K 3M4; email: foip@uleth.ca; phone: 403-332-4620.

Reminder student applications are **due March 23** & References due 1-week later on **March 30**

|  |  |
| --- | --- |
| **Submission Date:** | *(mm / dd / yyyy)* |